Statement of Contributions Received

Prescribed by Secretary of State 3/05

Citizens for Alicia Healy Full Name of Cognitionary Sincer Address Freil Name of Cognitionary Sincer Address Freil Name of Cognitionary Freil Name of Cognitionary Freil Name of Cognitionary Sincer Address Full Name of Cognitionary Freil								
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	City	State	Zip Code	M	D	Y	Amount	

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]

